



PTO/SB/05 (08-00)

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ADDRESS TO:

UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Application Number	New Application				
First Inventor	Richard N. Ellson	PTO			
Title	"Device and Method for Tracking Conditions in an Assay"	25 U.S. 9/75123			
Attorney Docket Number	7610-0040	Jc8			

Box Patent Application

Washington, DC 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)
- 2 Applicant claims small entity status. See 37 CFR 1.27.
- 3. Specification [Total Pages 41+ Cover__] (preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 6
- Oath or Declaration [Total Pages 4-Unsigned
 - Newly executed (original or copy) a.
 - Copy from a prior application (37 CFR 1.63(d)) b. (for continuation/divisional with Box 17 completed)
 - **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- 6. □ Application Data Sheet. See 37 CFR 1.76

- CD-ROM or CD-R in duplicate, large table or 7. 🗆 Computer Program (Appendix)
- 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable)
 - Computer Readable Form (CRF) a. 🗆
 - Specification Sequence Listing on:
 - CD-ROM or CD-R (2 copies); or
 - ii.
 - Statements verifying identity of above copies

ACCOMP	ANVING	APPLICA	I MOIT A	ZARTS

- ☐ Assignment Papers (cover sheet & document(s))
- 10.

 37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee)
- 11.

 English Translation Document (if applicable)
- □ Copies of IDS 12.

 Information Disclosure Statement (IDS)/PTO-1449 Citations
- 13.

 Preliminary Amendment
- 14.

 Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 15. □ Certified Copy of Priority Document(s) (if foreign priority is claimed)
- 16. □ Other:

17. If a CONTINUING A	APPLICATION, che	ck appropriate box, and sup	oply the requisite inform	ation below and in a
preliminary amendment	, or in an Application	n Data Sheet under 37 CFF	R 1.76:	
□ Continuation	□ Divisional	□ Continuation-in-part (CIP)	of prior application No.:	

		Continu	uation	
Prior	apı	olication	information:	

Examiner:

□ Continuation-in-part (CIP)

Group / Art Unit:

F r CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the discl sur f the accompanying c ntinuation or divisional application and is hereby incorporated by reference. The inc rp ration can only be relied upon wh n a portion has been inadvertently omitted from the submitted application parts.

I hereby certify that this paper or fee is being deposited with the United States Postal Service	(Modified) PTO
"Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below	
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"Express Mail" Mailing Label No.: EL 567 216 679 US	
Date of Deposit: December 29 2000	

Type/Printed Name of Person Mailing Paper or Fee: <u>Mar</u>	rilyn	√.	3. /	1eK	e nna				
Signature of Person Mailing Paper or Fee: Marilya B. Me Kenne									
,					Complete	e if Known			
FEE TRANSMITTAL	App	olication	Numbe	er	New A	pplication			
TEE IKANSMITTAL	Fili	Filing Date			Filed I	Herewith			
	Firs	t Name	Inven	tor	Richai	rd N. Ellson			
	Gro	up Art U	nit		Not A	ssigned Yet			
Note: Effective October 1, 1997.		Examiner Name				Not Assigned Yet			
Patent fees are subject to annual revision.									
TOTAL AMOUNT OF PAYMENT \$935	Atto					-0040			
METHOD OF PAYMENT (check one) 1 The commissioner is hereby authorized to charge are	ny 3. /	ADDITIO	NAL FE		CALCUL	ATION (continued)			
additional fees and credit any overpayments to:	.,								
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Deposit Account Name: REED & ASSOCIATES	e Fee	y Fee	Fee Code	Fee (\$)		Fee Description		Fee Due	
Charge Any Additional Charge the Issue Fee set	Cod		•	\- <i>)</i>					
Fee Required Under 37 CFR 1.18 at the mai	iling 105	130	205	65	Surcharge -	late filing fee or oath			
37 CFR 1.16 and 1.17 of the Notice of Allowa	ance 127	50	227	25	_	- late provisional filing fee	or cover		
2. Payment Enclosed:	139	130	139	130	sheet	eet on-English specification			
2 Payment Enclosed: Check Money Order Othe		2,520	139	2,520	_	request for reexamination	1	<u> </u>	
	112	920*	112	920*	_	publication of SIR prior to			
FEE CALCULATION					Examiner a	ction			
1. FILING FEE	113	1,840 *	113	1,840 *	Requesting action	publication of SIR after E	Examiner		
Large Entity Small Entity	115	110	215	55	Extension f	for reply within first month	h		
Fee Fee Fee Fee	116	390	216	195		for reply within second mo			
Code (\$) Code (\$) Fee Description Fee		890	217	455		Extension for reply within third month Extension for reply within fourth month Extension for reply within fifth month			
101 710 201 355 Utility filing fee \$355 102 320 206 160 Design filing fee	118 128	1,390 1,890	218 228	695 945					
104 490 207 245 Plant filing fee	119	310	219	155	Notice of Appeal				
109 710 208 355 Reissue filing fee	120	310	220	155	Filing a brief in support of an appeal				
110 150 214 75 Provisional filing fee	121	270	221	135	Request for oral hearing				
SUBTOTAL (1) \$355	138 140	1,510 110	138 240	1,510 55	Petition to institute a public use proceeding Petition to revive - unavoidable				
2. CLAIMS Fee From Extra below Fee		1,240	240	620		revive - unavoidable			
Total Claims $80 - 20 = 60 X 9$ \$540	142	1,240	242	620		e fee (or reissue)		-	
Independent Claims 4 - 3 = 1 X 40	143	440	243	220	Design issu				
Claims $4 - 3 = 1 X 40$ Multiple Dependent Claims $X = 40$	144	600	244	300	Plant issue				
Large Entity Small Entity	122 123	130 50	122 123	130 50		the Commissioner lated to provisional applic	ations		
Fee Fee Fee Fee Description	126	240	126	240		iated to provisional applic is of Information Disclosur			
Code (\$) Code (\$)	581	40	581	40	Recording	each patent assignment pe			
103 18 203 9 Claims in excess of 20		710	246	255	•	ber of properties)			
102 80 202 40 Independent Claims in excess of 104 270 204 135 Multiple Dependent Claim	of 3 146	710	246	355	(37 CFR 1.	omission after final rejection 129(a))	JII		
109 80 209 40 Reissue independent claims ov original patent	er 149	710	249	355	For each ad	ditional invention to be			
110 18 210 9 Reissue claims in excess of and Other fee (specify)									
over original patent	Othe	Other fee (amosify)							
SUBTOTAL (2) \$580		Other fee (specify) *Reduced by Basic Filing Fee Paid				d SUBTOTAL (3) \$			
SUBMITTED BY		Complete (if app					·		
Typed or Printed Name Dianne E. Reed						Reg. Number	31,292		
Signature Dance Elle	d	Date	12	129	100	Deposit Account			

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□ Customer Number o	f Bar Code Label		239380				or Correspondence address below		
		(Insert Custome	T TRADEMA OF NO. OF	Attach bai	code label here				
Name	Dianne E. Reed	I							
	REED & ASSO	CIATES							
Address	3282 Alpine Ro	3282 Alpine Road							
City	Portola Valley		State		CA		Zip Code		94028
Country	USA		Telephone		(650) 851-8501		Fax		(650) 851-6333
Name (Print/Type)	Dianne E. Reed	Registration No. (Attor			torney//	rney/Agent) 31		292	
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